

2001/2002 Annual Report to the Community

I am pleased to provide you with the Annual Report of the Brandon RHA for 2001/2002, prepared in accordance with the Regional Health Authorities Act and the guidelines provided by Manitoba Health.

This report is structured around the corporate priorities established by our Board, providing a status update on the initiatives that have been undertaken to achieve our goals. The work that has been done since the inception of the Brandon Regional Health Authority to integrate all the components of healthcare in this Region into a cohesive, functional organization is a source of great pride for our Board. We remain committed to further refinements and improvements within our system.

The commencement of construction for the Clinical Services Redevelopment Project at Brandon Regional Health Centre was a milestone for the Brandon RHA and as the structure continues to rise, the plans and dreams developed over a span of two decades are now coming to fruition. We continue to prepare for the changes in practice and new programs that will be offered in the new facility.

As I leave the Board of the Brandon RHA, after three years as a Board member and two additional years as Board Chair, I am grateful to have had the opportunity to be a part of this organization. I leave the Board with full confidence that incoming Chair Larry Hogue, members of the Board, the management team and all Brandon RHA employees will continue to strive to provide effective and efficient healthcare to the residents of the Southwestern Manitoba. Thank you for the opportunity to serve on the Brandon RHA Board and for the support you have provided to this Region.

Dr. Jim Reid
Chairman of the Board



Brandon Regional Health Authority Inc.

VISION.....

A model region, responsive to the community through teamwork and a focus on "health".

MISSION.....

Promotion of healthy choices and delivery of health services across the lifespan in a variety of settings; in partnership with the residents of the Brandon and neighbouring Regions.

VALUES.....

We Believe In.....

Integrity and are committed to being open and honest with our partners in the workplace and the people that we serve.

Continuous Improvement as a means of achieving quality, efficiency, excellence and promoting creativity in all that we do.

Respect and Dignity in life and in death and will promote client choice, and be sensitive to the needs of individuals, families and co-workers.

Teamwork and shared decision-making as being integral to reaching our mission, vision and goals.

Accessibility to services in a seamless delivery system and a single point of entry in multiple sites.



2001 - 2002 Brandon RHA Board of Directors

pictured left to right

Back row:

Middle row:

Front row:

Use Sound Planning Principles

Implement "Information Technology Strategy"
- In capital plan and in the redevelopment project.

Action

Redevelopment Information Technology requirements have been included in capital budget and will continue to monitor Provincial initiatives as they progress slowly.

Status

Continue bi-regional planning initiatives to accessible services
- Assiniboine & Brandon

Action

Bi-regional Diagnostic Imaging services are being provided. (Assiniboine and Brandon)

Status

Interdisciplinary/ Collaborative team approach to service delivery.

Action

Redevelopment Coordinating Teams and Steering/implementation committees have representation from across programs and sites. Community Postpartum program staff have been integrated with Public Health. Respite care beds were moved from hospital to Personal Care Home setting. Registered Psychiatric Nurses from Centre for Adult Psychiatry provide consultation services in the Emergency Department days/evenings and throughout other areas of the hospital as requested. S.T.E.P. and Home Care staff provides seamless service through a referral process and common protocols. Quality Project Improvement Teams also include membership from across programs/sites e.g. Sexual Assault program, post-exposure protocol, staff immunization program, diabetes education in hospital, etc. Administration departments are centralized. Industry standard information technology applications are used.

Status

Develop programs/services based on evidence and the Community Health Assessment.

Action

Corporate indicators (stats) are reported to Executive Management Committee and Board on a consistent basis. The data collected is utilized in the strategic planning processes.

Status

Highlights

- Implementation of the Electronic Health Record is in progress, which will increase efficiency and accuracy for all clients/patients.
- Personal Health Information Act (PHIA) guidelines and policies have been implemented to ensure the right to access personal health information and the right to have personal health information kept private.
- Utilization Coordinators take the responsibility for efficient utilisation of medical and surgical beds. Emphasis is being placed on minimizing the length of stay and utilising services outside the acute care facility.
- Enhanced Home Care Coordination and Assessment has been achievable with the implementation of a hospital-based Case Coordinator.

Create An Environment Where Staff Can Thrive And Be Productive

Implement a Human Resource education program. Retirement planning and Employee benefits.

Action

HR reviews benefit plans at Department Head meetings and regional orientation sessions. Staff may ask for a review of plans individually at any time. HR offers retirement, financial and will and estate planning in-services.

Status

Develop a region-wide "Human Resource Plan"

Action

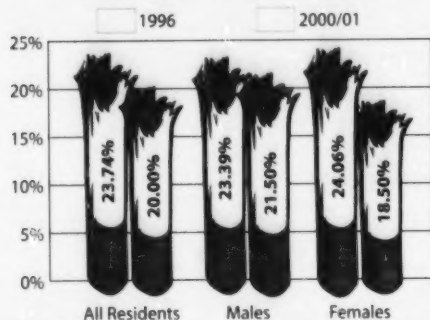
In process of determining the needs of the staff and then will develop a long-term plan.

Status

Highlights

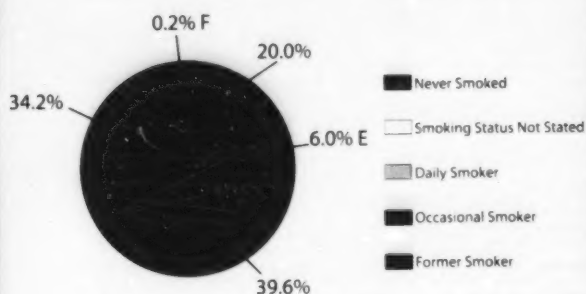
- A provincial Employee Assistance Program was introduced for all health care workers, funded within the global budget. Employees now have access, at no charge, to professional counselling to assist them in dealing with any problems that may affect their health or work performance. This assistance is available 24 hours per day, 365 days per year on a uniform basis across the province.
- The Human Resources Department was involved in finalizing the CUPE Wage Parity project, developing province-wide templates for Voluntary Essential Service Agreements, implementing an Interim Human Resource Plan and providing some major commitments to advance aboriginal hiring initiatives.
- Unique recruitment and retention efforts have led to a full complement of ultrasonographers by September 2002, full staff in physiotherapy by summer 2002, and the laboratory being almost fully staffed.
- There is an ongoing focus on supporting staff via educational opportunities. A number of direct care nurses representing most program areas continue their progress on baccalaureate degrees and post diploma clinical specialty programs.
- A new collective agreement with the Manitoba Nurses Union was achieved.

Percentage Of Brandon Residents who Smoke



1996 Data Source: National Population Health Survey: Proportion of Regular Smokers
2000/01 Data Source: Health Indicators, May 2002 Publication: Proportion of Daily Smokers

Smoking Status: Brandon



Household Population Aged 12 and over 2000/01

E - Data should be interpreted with caution
F - Data suppressed due to extreme sampling variability

Average age Brandonites (Males and Females) start smoking



2000/01 Data Source: Health Indicators, May 2002 Publications: Smoking initiation

Did You Know?

FACT: Low birth rate is related to tobacco use. 28% pregnant woman in the Brandon region smoked prenatally in 1997/98 compared to 32% in 1995.

Information from Stats Canada Health Indicators

Did You Know?

FACT: Only 28% of women who smoked chose to have pre-natal care compared with 72% who didn't smoke.

Information from Stats Canada Health Indicators

Did You Know?

FACT: 33.5% of Brandon's non-smokers are exposed to second hand smoke.

Information from Stats Canada Health Indicators

Gain Appropriate Resources To Do The Job

Expand Social Worker resources to serve Extended Care, ICU, Nephrology, Emergency and Medicine.

Action

To improve accessibility and involvement in patient care planning, confidential social work services are now available to all inpatients throughout the hospital. Workers are assigned to specific inpatient units and outpatient programs. One new Social Worker was hired; however, workload continues to exceed resources.

Status

Identify resource requirements based on recommendations from internal and external reviews and standards e.g. introduction of an "acute pain service".

Action

Resource requirements have been identified, but unable to allocate due to shortfall. The surgical Program Educator has been able to meet this need to a limited degree.

Status

Complete Implementation of Echocardiography expansion.

Action

Manitoba Health provided funds for capital equipment in 1999/00; however, Sonographer shortages continue. An LPN has been employed to support the specialist.

Status

Continue planning & program implementation of the Brandon Regional Health Centre Redevelopment Project.

Action

Construction is underway. Staff have started to implement the new processes for many of the programs offered in the new Centre. Plans are being developed to implement a Cardiac Clinic and Respiratory Clinic by the end of the fiscal year. An Enterostomal Nurse for Ostomy program for three regions (Assiniboine, Brandon, Parkland) is currently being educated. Enhancements to the Day Treatment/Short Stay unit have begun within the plans of the redevelopment project and a Cast Technician has been hired.

Status

Highlights

- Improved financial reporting with the upgrade to a new financial system (Logibec).
- Funding was provided for specialized equipment; particularly monitors and anaesthetic machines. Funding was also committed to address urgent equipment such as fetal monitors, radio fluoroscopy room, and Nuclear Medicine gamma camera.
- Radiology Information System has been upgraded along with a new scheduling system.
- The RHA continues to negotiate with Manitoba Health for funding levels to adjust the base budget appropriately.
- Implemented the Automated Medication Distribution System (AMDS). This allows the pharmacists to be involved with the planning of care for patients/clients. Decentralization of pharmacists will be fully implemented upon successful recruitment of additional pharmacists.
- The success of the Energy Efficiency committee was recognized by the Volunteer Challenge & Registry Department of the Federal Government and culminated in a national award being presented in Ottawa. The award was the "2001 Leadership Award" for Energy Efficiency, for all the innovative work done by the committee.
- Implemented an Equipment Maintenance Insurance Program, which replaces the use of service contracts for equipment. The program will improve service requirements and result in significant cost reductions.
- Waste management and recycling are areas where Environmental Services continue to make progress. Due to the efforts of this department, the amount of waste going to the landfill site has decreased to 175,100 lbs. in 2001/2002 as compared to 220,850 lbs. in 1999/2000. As well, the amount of recycling has increased to 105,400 lbs in 2001/2002 as compared to 40,000 lbs. in 1999/2000.

Maintain A Results Oriented Customer Focus

Reduce operating room and endoscopy waiting lists.

Action

Surgical wait lists decreased from 1900 to 1500. Elective orthopaedics patients continue to wait unacceptable lengths of time. Endoscopy wait lists remain high; however a proportion is surveillance, therefore a wait time is appropriate. Capacity for endoscopy will increase by 100% as the redevelopment becomes functional.

Status

Reduce waiting lists in Diagnostic Imaging.

Action

Due to staff shortages the Ultrasound waiting list is up to 12 months for elective procedures. To cope with shortages the day shift has been extended into the evening. Full staffing will be in place by the fall of 2002 as an educational plan has been implemented.

Status

Reduce waiting lists in Diagnostic Imaging.

Action

Program and process changes within the redevelopment program will promote a decrease in length of stay and admission rates.

Status

Highlights

- The Regional BioMedical Services program continues to grow and expand its role, providing service to almost 175 sites in Manitoba and Saskatchewan.
- Nutrition Services has continued the implementation and further development of the Computerized nutrition program for food services. The success of their work has led to other healthcare organizations signing on as a user of the Brandon RHA system.
- All in-patient surgical units have been consolidated.
- An Extended Care Program has been established through the consolidation of three patient care units.
- New nursing positions known as Clinical Resource Nurses have been created and provide a supportive function to patients and direct care staff as they coordinate patient care, patient flow, communication and support clinical care.
- Program development/enhancement for users involved in the BRHC redevelopment has started in: Paediatric Clinic, Hemodialysis, Clinical Pharmacy, Emergency, ICU, Nursing Research.
- Palliative Care Training was provided for the Palliative Care Coordinator, Home Care Attendants and support staff at Robson Park.

Take A Broad, Proactive Approach To Health Care Delivery To Create A Healthier Community

Increase public awareness of existing services & resources in the community.

Action

Review of all RHA programs/services delivered and placed at hospital buildings and visiting areas of all community-based programs. Directories also distributed to various community agencies. Directory of children's services included in City of Brandon newsletter.

Status

Fully implemented Bi-regional Midwifery Program.

Action

Program has been established in a standalone setting with 2.0 equivalent full-time staff. The program is confined to the geographical boundaries of the Brandon Region due to lack of resources and specialist support in the Assiniboine Region. Program intake capped at 10 clients and a waiting list established with consideration being given to terminating the program, as it is not sustainable with less than 2.0 equivalent full-time staff.

Status

Highlights

- Client survey form used to ensure a grade free workplace for employees.
- The Brandon RHA actively supported and lobbied City Council for a smoking ban.
- The web page has been increasingly used to highlight public health activities.
- A Regional Health Forum has been held to work with community groups in Brandon, Winnipeg, etc. to improve access to health.
- A Health Services Agreement has been filed to monitor effectiveness of the health status of our community and the quality of our health services.

Regional Health Authority Provincial Initiatives

- **Universal Infant Hearing Screening program** (target is all newborns in all regions) - Implemented in Brandon with support from Lions Club International for purchase of equipment. The program also includes the Assiniboine RHA.
- **Provincial Audiology Five-Year Capital Plan** - One-time funding of \$90,000 for FM units.
- **Sexual Assault Services** (to serve Brandon, Assiniboine, Parkland RHAs) - On-site training for nurses completed and includes all but pelvic exam. Information booklet developed. Volunteers recruited and trained.
- **Travel Health Information Network** - Brandon has formalized a fee-for-service program providing service two days per week.
- **Health Promotion** - Brandon will participate in Alliance Heart Health project. A five-year Heart Health project in collaboration with the Alliance for Chronic Diseases.

Manitoba Health Initiatives

- **Diabetes Strategy** - Discussions/planning re revised regional diabetes education program development continues.
- **Enhanced Flu Vaccination** - Increased number of locations for public access & opportunities for staff.
- **Blood Recipient Notification Program** - Completed with resources provided by Manitoba Health.
- **Nutrition Resource Guide for Home Care Direct Service Workers** - Training developed by Diptak & Direct Service Workers completed.
- **Pneumococcal Vaccination** - An estimated 200 administered.
- **Manitoba Health Has Initiated A Tobacco Reduction Strategy** - Brandon's strategy will be developed in collaboration with Assiniboine RHA.

The annual report of the Brandon Regional Health Authority for fiscal year 2001/2002 details the measures that have been taken and the initiatives that are planned to achieve the corporate priorities identified by the Board.

Healthcare delivery continues to be challenging - with staffing shortages in several professional disciplines, continued funding shortfalls and increased demands for service. This situation is not unique to the Brandon RHA or to the Province of Manitoba, but rather is common throughout Canada and even beyond our borders. Our employees continue to display a strong dedication to healthcare delivery to meet and overcome these day-to-day demands. They are truly the major contributors to the success the Brandon RHA has achieved.

With the strong support of the Board, we have made great strides over the past five years. I am extremely proud of the evolution of the Brandon Regional Health Authority and of the members of the management team and front-line staff who have made this success possible.

Earl E. Backman
Chief Executive Officer



Executive Management Committee

Earl Backman
Chief Executive Officer
Helga Bryant
Vice President Acute Care & Diagnostic Services
Carmel Olson
Vice President Planning, Community Services & Long Term Care

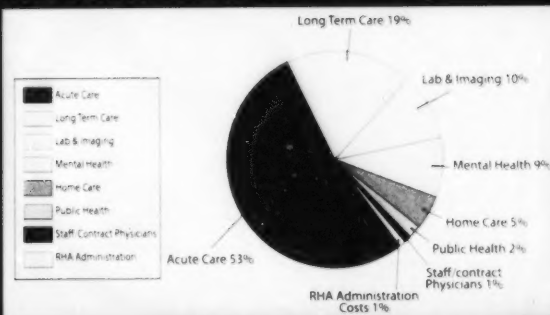
Brian Schoonbaert
Vice President Finance & Information Services
Gary McIntosh
Vice President Support Services
Dr. Charles Wilson
Chief of Staff
Janet Wilcox-McKay
Comptroller/Corporate Liaison

Communication Activities

The community and Brandon RHA staff is kept up to date on issues and activities of the Brandon RHA through the following:

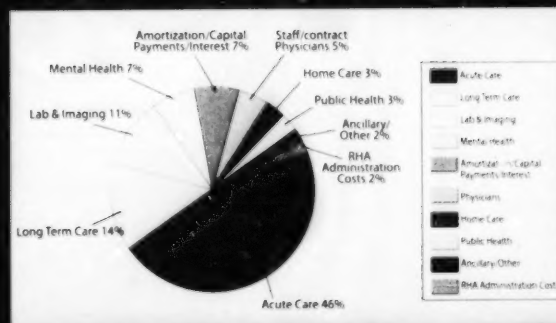
- The Brandon Regional Health Authority web page (www.brandonrha.mb.ca) is annually updated with increasing information on specific programs and services available. Job postings are added daily to the web page with applications accessible online.
- An internal staff newsletter, the Regional Responder, is distributed throughout the Brandon RHA and local media on a monthly basis. An increasing number of areas maintain their own site specific staff newsletters.
- Open Communication Meetings are held quarterly. These meetings give all staff and volunteers a chance to hear what is going on in the Brandon RHA and to ask questions.
- An informational public newsletter, Health Care News, is produced approximately three times per year with a circulation of 36,000 copies throughout Southwestern Manitoba.
- Brandon RHA Board Meetings are held monthly in the City of Brandon Council Chambers. These meetings are open to the public and broadcast on WCG TV.
- A 30-minute televised production, which features the CEO and Board Chair being interviewed on current issues within the Brandon RHA, is aired on a regular basis on WCG TV.
- Newscasts on local radio and television stations are kept up to date with Brandon RHA information.
- The Brandon RHA Comment Line is an opportunity for the public to voice their opinions about the Brandon RHA and provide comments on services or health care in general.
- The Brandon RHA Annual Report is produced annually and available at the Annual General Meeting and the Brandon RHA Administration office.
- Brandon RHA Directory of Programs and Services is placed at each bed side and throughout the Brandon RHA. Soft cover directories are also available free of charge from the Administration office.

Where are the Staff Employed at the Brandon RHA



Regional Human Resource Profile

Where are all the \$Dollars Spent?



All Funding

A complete set of financial statements and auditors reports can be obtained from the Brandon RHA administration office

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